

PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: **Mail** Mail Stop ISSUE FEE
 Commissioner for Patents
 P.O. Box 1450
 Alexandria, Virginia 22313-1450
 or **Fax** (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

20786 7590 06/05/2006

KING & SPALDING LLP
 1180 PEACHTREE STREET
 ATLANTA, GA 30309

09/07/2006 ZJUHR2 00000033 10635805

01 FC:1501 1400.00 OP
 02 FC:1504 300.00 OP
 03 FC:8001 6.00 OP

Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

Diane M Guilfooy (Depositor's name)
 Diane M Guilfooy (Signature)
 August 30, 2006 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
-----------------	-------------	----------------------	---------------------	------------------

10/635,805 08/05/2003 Jean Rapin 10945.105003 (NEURO 102US 9760

TITLE OF INVENTION: TRIPEPTIDES AND TRIPEPTIDE DERIVATIVES FOR THE TREATMENT OF POSTLESIONAL DISEASES OF THE NERVOUS SYSTEM

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
-------------	--------------	-----------	-----------------	------------------	----------

nonprovisional NO \$1400 \$300 \$1700 09/05/2006

EXAMINER	ART UNIT	CLASS-SUBCLASS
----------	----------	----------------

CORDERO GARCIA, MARCELA M 1654 514-018000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Madeline I. Johnston, Esq.

2 _____

3 King & Spalding LLP

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Neurotell AG

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Hergiswil, Switzerland

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
☒ Publication Fee (No small entity discount permitted)
☒ Advance Order - # of Copies 2

4b. Payment of Fee(s):

- ☒ A check in the amount of the fee(s) is enclosed.
☐ Payment by credit card. Form PTO-2038 is attached.
☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 11-0980 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature Madeline I. Johnston

Date August 30 2006

Typed or printed name Madeline I. Johnston, Esq.

Registration No. 36,174

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application No.: 10/635,805
Applicant : Rapin, et al.
Filed : August 5, 2003
TC/A.AU. : 1654
Examiner : Marcela M. Cordero Garcia
Title : Tripeptides and Tripeptide Derivatives for the Treatment of Postlesional Diseases of the Nervous System
Docket No. : 10945.105003 (Neuro102US)
Customer No. : 20786

August 30, 2006

ISSUE FEE TRANSMITTAL

Sir:

Applicants enclose the PTOL-85B Issue Fee Transmittal Form and payment of the issue fee in the above-referenced application. Applicants believe that the issue fee is \$1400.00 for a large entity, the publication fee is \$300.00 and the advanced order fee for two extra copies of the issued patent is \$6.00 (2 x \$3.00). Enclosed is a check for \$1,706.00. The Commissioner is authorized to charge any deficiency or credit any overpayment to Deposit Account No. 11-0980.

Respectfully submitted,

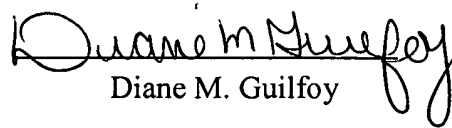
Madeline I. Johnston, Esq.
Registration No. 36,174

KING & SPALDING
1180 Peachtree Street
Atlanta, Georgia 30309
404-572-4720 (Telephone)
404-572-5134 (Facsimile)



CERTIFICATE OF MAILING (37 CFR 1.8a)

I hereby certify that this Transmittal of Issue Fee, Form PTOL-85, check for \$1,706.00 and post card along with any paper referred to as being attached or enclosed, is being deposited with the United States Postal Service on the date shown below with sufficient postage for first-class mail in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313.


Diane M. Guilfoyle

Date: August 30, 2006